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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | | | on unless it displays a valid OMB control number. Application or Docket Number | | | |
|---|---|--------------------|---------------------------------------|------------------------|--|-------------------|--------------------|--------------------|--|---|----------------------------|------------------------|--|
| CLAIMS AS FILED – PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | |
| FOR | | | NUME | BER FILE | D NUME | NUMBER EXTRA | | RATE | FEE | 1 | RATE | - CCE | |
| BASIC FEE (37 CFR 1.16(a)) | | | | | | 1 | 10112 | | 1 | INTE | 270.0 | | |
| TO | TAL CLAIMS | | 15 | | 20 - . | | ┨╏ | | <u> </u> | OR | | 8 10.0 | |
| ΙÑ | CFR 1.16(c)) | IMS | / minus 2 | | 20 = - | | ┨╽ | × \$= | ļ | OR | × \$= | <u> </u> | |
| (37 | CFR 1.16(b)) | l | | minus 3 = | | <u> </u> | | × \$= | | OR | x \$= | <u></u> | |
| М | JLTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | | | | + \$= | | OR | + \$= | | |
| • 11 | * If the difference in column 1 is less than zero, enter *0* in column 2. | | | | | | | TOTAL | | OR | TOTAL | 76.0 | |
| CLAIMS AS AMENDED - PART II (Setume 1) (Setume 2) (Setume 2) OR OTHER THAN | | | | | | | | | | | | | |
| Ų | | | olumn 1) | | (Column 2) | (Column 3) | | SMALL | ENTITY | OR | | ENTITY | |
| AMENDMENT A | RE AM | | CLAIMS MAINING AFTER ENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total (37 CFR 1.16(c)) | c | 27 | Minus | 127 | = / | 1 [| x \$ = | | OR | x \$ = | 1 | |
| | Independent (37 CFR 1.16(b)) | | / | Minus | 3 | =/ | 1 | x \$ = | | OR | x \$ = | / | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFF) 1.16(d)) | | | | | | | + 5 = | | OR OR | | / | |
| | | | | | ı | 1 | JL | TOTAL ADD'L FEE | / | OR | TOTAL ADD'L FEE | / | |
| | | (Col | umn 1) | | (Column 2) | (Column 3) | | | (| | | <u> </u> | |
| AMENDMENT B | | REA A | LAIMS AAINING FTER NDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total (37 CFR 1.16(c)) | | | Minus | ** | = | 1 | x \$ = | | | | FEE | |
| | Independent (37 CFR 1.16(b)) | • | | Minus | *** | = | 1 | | | OR | × \$= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | | X \$= | | OR | X \$= | | |
| (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | + \$= TOTAL | | OR | + \$ = | | |
| | | | | | | • | | ADD'L FEE | | OR | ADD'L FEE | | |
| _ | | | umn 1) AIMS T | | (Column 2) HIGHEST | (Column 3) | _ | | | | | | |
| AMENDMENT C | | REM AF | AINING TER IDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total (37 CFR 1.15(c)) | • | | Minus | •• | = | [; | < \$ = | | OR | x \$ = | | |
| | Independent (37 CFR 1.16(b)) | • | | Minus | *** | = | | < \$ = | | OR | x \$ = | | |
| ₹ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | | + s = | | OR | + \$ = | | |
| | | | | | | _ | TOTAL ADD'L FEE | | OR L | TOTAL | | | |
| ••• | If the "Highest N | lumber lumber l | Previously F Previously F | Paid For" Paid For" | in column 2, write IN THIS SPACE is IN THIS SPACE is | s less than 20, e | 3. enter | "20". " | J | | ADD'L FEE | | |
| | The "Highest Nu | mber P | reviously Pa | aid For" (1 | Total or Independe | nt) is the highes | st nur | nber found in ti | ne annronriate | hay in cal | umn 1 | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.